Case 17-13281-mdc Doc 125 Filed 09/16/21 Entered 09/16/21 11:21:23 Desc Main Document Page 1 of 2

Fill	in this information to identify your o	ase:									
Del	btor 1 Patricia L. F	itzgerald									
	btor 2 puse, if filing)				_						
Uni	ited States Bankruptcy Court for the	EASTERN DISTRICT	OF PENNSYLVAN	IA							
Cas	se number 17-13281					Check if this	is:				
(If kı	nown)					■ An amended filing □ A supplement showing postpetition chapter 13 income as of the following date:					
0	fficial Form 106l					MM / DD	/ YYYY				
S	chedule I: Your Inc	ome						12/15			
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	ır spouse is not filing w	ith you, do not incl	ude infor	matio	on about your s	pouse. If me	ore space is needed,			
1.	Fill in your employment information.	Debtor 1	Debtor 1				Debtor 2 or non-filling spouse				
	If you have more than one job,	F	■ Employed		☐ Em	☐ Employed					
	attach a separate page with information about additional employers.	Employment status	☐ Not employed		□ No	☐ Not employed					
		Occupation	Teacher								
	Include part-time, seasonal, or self-employed work.	Employer's name	Wissahickon S	School D	istri	ct					
	Occupation may include student or homemaker, if it applies.	Employer's address	1721 Yost Roa Blue Bell, PA								
		How long employed t	here? 17 Ye	ars							
Pai	rt 2: Give Details About Mo	nthly Income									
	imate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to	report for	any l	line, write \$0 in t	he space. Inc	clude your non-filing			
,	ou or your non-filing spouse have m e space, attach a separate sheet to		ombine the informati	on for all e	emplo	oyers for that pe	son on the li	nes below. If you need			
						For Debtor 1		btor 2 or ing spouse			
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	9,237.9	<u> </u> \$	N/A			
3.	Estimate and list monthly over	time pay.		3.	+\$	0.0) +\$	N/A			

Official Form 106I Schedule I: Your Income page 1

9,237.91

N/A

4. Calculate gross Income. Add line 2 + line 3.

Debt	or 1	Patricia L. Fitzgerald				Case ı	number (<i>if k</i>	nown)	1	7-13281		
						For	Debtor 1			For Debtor		
	Cop	by line 4 here		. 4.		\$	9,23	7.91	_ =	\$	N/A	<u>\</u>
5.	List	all payroll deductions:										
	5a.	Tax, Medicare, and Social Secur	ity deductions	5a	a	\$	1,83	5 60		\$	N/A	
	5b.	Mandatory contributions for reti	-	5b		\$_		2.84	_	\$	N/A	_
	5c.	Voluntary contributions for retire	•	50) .	\$		0.00	-	\$	N/A	
	5d.	Required repayments of retirement	ent fund loans	50	d.	\$	(0.00	:	\$	N/A	<u></u>
	5e.	Insurance		5€		\$		5.30	_	\$	N/A	
	5f.	Domestic support obligations		5f		\$		0.00	_	\$	N/A	_
	5g. 5h.	Union dues Other deductions. Specify:		5g). 1.+	\$ \$		0.00 0.00	_	\$	N/A N/A	
^			5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 -		1.∓	· —			-	·	-	_
6.		d the payroll deductions. Add lines	Ğ	6.		\$_	2,87		_	\$	N/A	_
7.	Cal	culate total monthly take-home pay	Subtract line 6 from line 4.	7.		\$	6,36	4.08	- ;	\$	N/A	<u>\</u>
8.	List 8a.	t all other income regularly received Net income from rental property profession, or farm Attach a statement for each proper receipts, ordinary and necessary b	and from operating a business, ty and business showing gross									
		monthly net income.		88		\$		0.00	_	\$	N/A	_
	8b. 8c.	Interest and dividends	ou, a non-filing spouse, or a depende	8b).	\$		0.00	- :	\$	N/A	<u>\</u>
		regularly receive Include alimony, spousal support, of settlement, and property settlement	child support, maintenance, divorce	80		\$		0.00	_	\$	N/A	
	8d.	F		80		\$		0.00	_	\$	N/A	_
	8e. 8f.	Social Security Other government assistance the	ot vou regularly receive	86	€.	\$	•	0.00	- ;	\$	N/A	<u>\</u>
	oi.	Include cash assistance and the va	alue (if known) of any non-cash assistar nps (benefits under the Supplemental	nce 8f		\$	(0.00	;	\$	N/A	\
	8g.	Pension or retirement income		80	J.	\$		0.00	_ ;	\$	N/A	<u> </u>
	8h.	Other monthly income. Specify:	2020 Prorated Tax Refund (\$1691/12)	8h	1.+	\$	14	0.92	+ :	\$	N/A	<u>\</u>
9.	Add	d all other income. Add lines 8a+8b-	+8c+8d+8e+8f+8g+8h.	9.		\$	14	0.92		\$	N/	Α
10	Cal	culate monthly income. Add line 7	Lline 9	10.	\$	•	6,505.00	+ \$		N/A	= \$	6,505.00
10.		I the entries in line 10 for Debtor 1 and			Ψ_		3,303.00	┤` *		IVA	┤ [¯]	0,303.00
11.	Incli othe Do i	ude contributions from an unmarried per friends or relatives.	the expenses that you list in Schedu partner, members of your household, you ded in lines 2-10 or amounts that are no	our depe		•	,		,	in Schedul	le J. +\$	0.00
12.		te that amount on the Summary of Sc.	ine 10 to the amount in line 11. The restricted in the state of the st								\$	6,505.00
40	D -		within the second for the control of	0							Combi month	ined Ily income
13.	Do ; ■	No. Yes. Explain:	e within the year after you file this for	rm?								

Official Form 106I Schedule I: Your Income

page 2